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ABSTRACT

To professionalize health, physical education, and recreation is to have professional practice controlled by the profession. This paper discusses the purpose of four primary types of credentials available for practitioners: licensure, certification, accreditation, and registration. The discussion includes documenting some of the dangers associated with exercising the professional privilege of granting credentials. In offering considerations for credentialing, it is noted that professional organizations have a role in insuring that professional practice is under the scrutiny of the profession. As organizations are asserting as a goal the professionalizing of their fields of study, they are developing standards for professional practice, influencing licensing and accreditation agencies, and establishing certification programs. It is emphasized that the professionals of physical education, recreation, and health must claim jurisdiction over the practice of their applied disciplines, and provide leadership in delineating professional roles and their corresponding standards. (JD)

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PROFESSIONALIZING HEALTH, PHYSICAL EDUCATION AND RECREATION

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PROFESSIONALIZATION

To professionalize health, physical education, and recreation is to have professional practice controlled by the profession. Professionalization is attained and maintained through the process of credentialing, and serves primarily as an assurance for the consumer. As expressed by Wise (1986, 24), for the consumers to be able to trust individual professionals, they must first trust the collective profession to control professional practice.

Likewise, for the profession to trust its practitioners, the practitioners must have been sanctioned by the profession's members. A profession must understand that unless it establishes and maintains standards for professional practice, its status as a profession is at risk. This is precisely the launching pad used by both the Carnegie Commission and the Holmes Group as they seek to professionalize education. Put another way, they seek to change teaching from an occupation to a profession. The establishment of the National Board for Professional Teaching Certification is intended to ultimately result in the control of professional preparation of teachers by the profession.

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PURPOSE AND TYPE OF CREDENTIALS

A credential recognizes fulfillment of a preestablished set of standards. It represents a "seal of approval" that a competency level of a professional is assured the consumer. Historically, most credentializing efforts in the fields of health, physical education, and recreation have served the purpose of controlling entry into the profession. As such, credentialing has been, and in most cases continues to be, more of an entry level quality assurance than of quality control (Shimberg, 1984, 104).

There are four primary types of credentials: licensure, certification, accreditation, and registration. Certification and licensure relate to standards for individuals, and accreditation relates to standards for programs. Registration serves both individuals and programs.

Licensure is a mandatory process, by virtue of being a condition for employment. Licensure is controlled by a governmental agency generally at the state level. It exists foremost for the protection of the health, safety and welfare of society. Licensure is concerned with minimal standards, and seeks to screen out those who might "do harm" to the public.

Certification is a voluntary process, and its use is discretionary, by the employer, by the consumer, and by the practitioner. Both the employer and the consumer are free to seek services from practitioners who are not certified as well as from those who are certified. Since non certified individuals cannot be prohibited from practicing their line of work, certification, then, is optional. Often, however, practitioners are prohibited from using a title for which there exists certification. When this dimension is enforced (usually by law), certification enjoys the benefit of title control.

Shimberg (1984, 112) suggests that while certification is supposed to be voluntary, eventually it will become just as important as licensure. Unlike licensure, certification is intended to be concerned with qualifications above the minimum level. Also, during times of aggressive litigation and when accountability is the law of the land, there is bound to be a leaning by employers toward those who are certified. Certification may also be perceived as being as important as licensure in the eyes of the consumer, since the consumer has the choice of selecting certified professionals over non certified personnel. In contrast to licensure, certification is under the auspices of a non-governmental body, usually a professional organization. The professional body not only assumes responsibility for setting the professional standards, but is responsible for examining the candidate and issuing the certificate.

Accreditation is a voluntary process whereby a professional organization or governmental agency grants recognition to an institution or to a program for having met predetermined standards. In the case of institutional accreditation, the standards are heavily influenced by professional groups. An example is the North Central Accreditation for Teacher Education (NCATE), which utilizes professional standards developed by the National Association for Sport and Physical Education (NASPE). Program accreditation, on the other hand, is generally under the auspices of professional organizations.

Registration is merely listing individuals who have been licensed or certified, institutions which have been accredited, or programs which have been accredited. Such a listing is referred to as a registry. It is often prepared by professional organizations, for use by the employer and consumer. Registration is a voluntary form of credential.

By definition, the distinctions among licensure, certification, and accreditation are clear; however by practice the distinctions are less clear and are often is interwoven. In spite of the understood distinctions, several professional organizations have established certification standards which certify only at a minimal level, and only for entry level skills. The blurring between licensure and certification is also evidenced when governmental agencies use successful completion of a certificate as a condition for licensure. A compounding factor is the currently referred to teaching certificate, which is, in reality, a teaching license. Accreditation sometimes contributes to the lack of distinction among the forms of credentials. This occurs when successful completion of an accredited program is a condition for licensure or certification. A registry generally includes not only a list of individuals, institutions, or programs which hold the particular credential (license, certificate or accreditation), but also includes the standards the respective credential.

All forms of credentialing lend themselves to an active and assertive role by professional organizations. As expressed by McGill (1986, 12), professional organizations yield the power to control virtually every aspect of professional practice. Either directly or indirectly, a professional organization holds the trump cards in the game of credentialing. To the extent that it uses its clout it will insure that professional practice is under the scrutiny of the profession. And, to the extent that it misuses or abdicates its clout, it forfeits the privilege of overseeing professional practice and must accept either governmental control or have the so called profession reduced to an

occupation. In turn, the professional organization is reduced to a special interest group to serve only its members or perhaps to serve in an advocacy role; or it may even face extinction. A profession must understand that unless it establishes and maintains standards for professional practice, its status as a profession is at risk. The profession must act out the notion that professional standards belong to the profession, not to the government, or employers, or institutions of higher education.

CAUTIONS OF CREDENTIALING

As a profession moves to claim its rightful role in credentialing, caution must prevail, to assure the absence of irresponsible credentialing. Most certainly there are some dangers associated with exercising the professional privilege of granting credentials (Holmes Group, 1986, 33).

* One such example of irresponsible credentialing is the failure of a profession to agree upon its body of knowledge; or the failure to relate its agreed upon body of knowledge to that which is essential for professional practice. Simply, is the body of knowledge universal and is it job-related?

* Another example of irresponsible credentialing is the failure to establish differential professional roles. The medical model is a good example of delineating the various roles which team up to provide health care delivery. The "one size fits all" model, or "one role fits all" as has characterized the preparation of physical educators, health educators, and recreation specialists, does not fit the spirit of a profession.

* Irresponsible credentialing also occurs when a professional organization exercises jurisdiction over allied groups, but excludes these groups from the decision-making process. Thus, a monopoly exists (Shimberg, 1984, 114). For years those in the credentialing business have claimed exemption from anti-trust laws, and have proceeded to suppress competition. This was done by having to be a member of the organization as a condition for certification, by having to complete association-sponsored workshops, and by other controlling strategies (Jacobs, 1979, 3-4). But of recent, the courts have emphasized that a monopoly is not in the spirit of American competitive policy, and are watchdogging attempts by professions to create such. One of the basic principles of antitrust laws is that competition,

even in the credentialing business, is in the best interest of the consumer. Therefore, states Bowman (1972, 105), there is need to break existing monopolies by opening alternative paths leading to credentials.

* Irresponsible credentialing exists not only when there is an absence of alternative paths leading to credentials, but when there is an absence of alternative approaches to attain a credential. Must everyone start at the same point and jump the same hurdles? what really matters is that all professionals evidence the same professional competencies. Bennett (1988) 34) has suggested that this very failure might explain the lack of interest in the teaching profession by bright and talented men and women. They simply are not willing to undergo the non-flexible processes.

* Still another example of irresponsible credentialing is bestowing credentials on under-qualified practitioners during periods of shortage. As pointed out by Wise (1986, 24), one of the primary weaknesses of licensure is that the standards tend to fluctuate with supply/demand trends. Unless the practitioner role changes, thus justifying a change in standards, the standards should remain relatively constant. Lowering standards undermines the very reason for their existence in the first place. Also, it sends a message to the consumer, and to the prospective practitioner. The credibility of any profession is directly related to its standards for professional practice.

* The creation of artificial scarcity is another example of irresponsible credentialing. This may occur when either the specified body of knowledge exceeds that which is necessary for professional practice and/or when the standard for achievement is unnecessarily high. As a result, the value of the credential is inflated (Holmes Group, 1986, 33). Such control may occur unconsciously as well as consciously. Nevertheless, the responsibility of any profession is to link professional standards with professional practice.

* When a credentialing group fails to assume responsibility for the performance of practitioners, irresponsible credentialing exists. Too often, a credential, be it a license or certificate, does not expect in-service professional development. Also, professionals too often turn a deaf ear to unprofessional practices. Consider the many individuals who practice in fields of study for which they are underprepared; such as graduate students who are teaching college-level classes and student leaders who assume many of the teachers' instructional responsibilities. Or consider some large urban systems where teachers are held to a different credentialing standard than are non-urban teachers (Haberman, 1986, 720). It is the responsibility of a profession to watchdog all forms of unprofessional practices.

* Another example of irresponsible credentialing is when credentialing plans assume a controlling role rather than a facilitating role. Described another way, when the professional services become too client-centered rather than consumer-centered. The medical model continues to be criticized for its emphasis on clientism -- that is, establishing a mind set of dependence rather than

independence; thus reducing the self-help concept (McGill, 1986, 7,9,11-2). The leisure field has been particularly vocal about the desirability of the self-help concept and the undesirability of clientism. In consumerism, emphasis is on self-help, as consumers make their own choices and take responsibility for their choices.

* Failure to have public representation is still another example. Unlike those professions in which the consumer partakes of services on a volunteer basis, the teaching profession does not benefit from a form of public representation which is made possible when the consumer has a choice. All credentialing processes must include a mechanism which open itself to consumer scrutiny and/or representation (Bowman, 1972, 110).

* When the preparer of the professional is also the certifier, there exists the potential for irresponsible credentialing. A conflict of interest is inherent when the same organization is both the preparer and the judge. Consider the institutions of higher education who prepare and also license (via entitlement) teachers. As Aristotle once asked, who should judge the banquet, the cook or the guest?

* One last example of irresponsible credentialing is when a professional organization engages in credentialing for the purpose of enhancing its professional image or status. When this is the primary goal, credentialing is merely a public relations effort. Any time a profession places its self-interest above that of the consumers, the profession is doomed; for professional status is determined, not by the profession itself, but by the consumers.

CONSIDERATIONS FOR CREDENTIALING

Of recent, there has been a dramatic reaffirmation of the role of professional organizations in insuring that professional practice is under the scrutiny of the profession (Jacobs, 1979, 3). This reaffirmation has taken on various forms. Increasingly, the organizations are asserting as a goal, that of professionalizing their fields of study. They have asserted this goal by developing standards for professional practice, by influencing licensing and accreditation agencies, and by establishing certification programs. And they have assumed a responsibility of developing informed consumers, by accepting as a goal, that of serving the public.

If the health, physical education, and recreat professions are desirous of having professional practice controlled by the profession,

They must develop action plans. What follows are recommendations which might be considered as part of such a plan. The suggestions are not intended to be all inclusive or to constitute a proposed plan. Rather, they represent lessons learned from other professional organizations which have pioneered the way.

The professions should establish a professional practices boards.

This board would oversee the professionalization of all the disciplines within its realm. Its emphasis would be on implementing and monitoring the professional standards of practitioners, and the board would make recommendations regarding the need for standards. The board could function as an arm of the profession, but would need to be insulated from the decision-making mechanisms of the professional organization.

The professions must establish their own definitions of a profession.

To accept no other definition than that which typifies the professions of law, medicine, and the like, is to concede that health, physical education, and recreation will forever be "emerging professions." It is not a matter of not measuring up; it is a matter of not fitting. For example, practitioners in the latter fields generally do not select their own consumers and do not practice one-on-one, as typify a profession. The definition should be fashioned after the delivery of service to consumers as a collective whole, and must be society's guarantor of quality rather than the individual's guarantor.

The professions should determine for what practitioner roles standards will be developed.

In determining these roles, it should not matter that there may already exist a credential for the role by an allied group. Since sound credentialing is voluntary and has alternative routes, it behooves the profession to make its own statement of professional standards.

The profession should develop criteria and standards of professional competence for each of the selected practitioner roles.

Criteria which stand the test of job-relatedness would be used. On the one hand, the criteria and the standards should be no more stringent than necessary to protect the welfare of the consumer; and on the other hand they should speak to professional competence rather than merely entry-level minimums. They should transcend the standards used for licensure. Also included, would be a code of ethics, which is intended to bridge the practitioner-

consumer relationship (Reynolds and O'Morrow, 1985, 108; Shimberg, 1982, 71). And, if deemed appropriate, title control would be part of the criteria. Such criteria and standards would eventually represent a measuring stick for use by all consumers, including allied groups and governmental agencies. In order to insure equal access, quotas must not be part of the criteria.

At a point after criteria and standards have been established for the selected practitioner roles, the professions should decide for which roles certificates will be issued.

Accompanying this decision are related decisions pertaining to fees, examinations, alternative paths, grandfathering, legal aspect, and monitoring. Where certificates are already being issued by another professional group or agency, the profession's certificate would be in addition to, rather than in lieu of. With respect to the monitoring process, the expression by Sagor says it all, "When an organization assumes a certification role, it is expected to apply the stick as well as the carrot (1985, 34)."

The professions should develop plans for continued professional development.

Initial certification is not a terminal event. It is the beginning of an ongoing process. To be a professional is to commit to ongoing development during one's professional life. The awarding of time-limited certificates is one way to help insure professional development. In the medical field where time-limited certificates are common, most are recertified every seven-ten years. However, across all professional fields, most do not require recertification, or continuing education (Gilley, 1985, 127). Nevertheless, a plan which helps to insure continued professional development must be made.

The professions should develop public awareness programs which emphasize their new credentialing role, and which seek to educate consumers.

Who are the consumers? Those for whom the service is directed, as well as employers, licensing agencies, accreditating agencies, and practitioners. A marketing effort is especially important since the credential is intended to be voluntary and without monopoly.

The professions should establish registries of allied groups that have professional standards which meet those established by the profession.

At the point that the profession begins to issue certificates and plays a more aggressive role in accreditation, registries should be assembled. Each registry would include the respective professional standards, to give meaning to the registry.

The professions must solidify their commitment to professionalization.

Though identified last, this really is the first order of of business. The professions must accept improvement of professional practice as their primary goal. Further, they must accept credentialing as an essential activity to attain this goal. And it must consider this goal as not only worthy but as a challenge within their grasp.

SUMMARY

It is a goal of virtually every professional organization to professionalize its fields of study. Of recent, there has been a dramatic reaffirmation of this purpose by many professional organizations (Jacobs, 1979,3). The time is right for the professions of physical education, recreation and health to consider their rightful place in credentialing. They must claim jurisdiction over the practice of their applied disciplines, and must provide leadership in delineating professional roles and their corresponding standards. Only then can they fully achieve their basic purpose-that of improving the level of professional practice.

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